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26479 7590 03/21/2005

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06/02/2005 YPOLITE2 00000020 09689273

01 FC:1501 1400.00 OP
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Michael P. Straub (Depositor's name)

Michael P. Straub (Signature)

May 27, 2005 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/689,273	10/12/2000	Rajiv Laroia	FLARION-1APP	7759

TITLE OF INVENTION: METHODS AND APPARATUS FOR GENERATING AND TRANSMITTING FREQUENCY DIVISION MULTIPLEXED SIGNALS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	XXX \$1400	\$0	XXX \$1400	06/21/2005
EXAMINER		ART UNIT	CLASS-SUBCLASS		
MILLS, DONALD L		2662	370-208000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Straub & Pokotylo

2 Michael P. Straub

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Flarion Technologies, Inc.

Bedminster, NJ

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee (No small entity discount permitted)☒ Advance Order - # of Copies 10

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☒ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge ~~XXXXXXXXXX~~ any deficiencies or credit any overpayment, to Deposit Account Number 50-1049 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☒ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Michael P. Straub

Date May 27, 2005

Typed or printed name

Michael P. Straub

Registration No. 36,941

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